Food Program Official Inspection Report



Siskiyou County Community Development Department Environmental Health Division 806 S. Main Street Yreka, California 96097 phone: (530) 841-2100, fax: (530) 841-4076

Facilit	y Na	weed Che	evror	า			^{Permit #} 000475				
Addre	<u></u>	12 S. Weed B			ed, C	A, 96064					
Permi	Permit Holder: Mountain Counties Supply Valid O Not Valid										
Phone											
	530-936-4529 Weed@micounites.com										
FUUU	Food Safety Certified Employee: NA Expiration Date:										
	1	1	MAJ			The marked items represent Health Code violations an	d must be corrected as follows:				
.du	-	Food Temp.		X	Х	ROUTINE INSPECTION CONDUCT	ED THIS DATE				
Ten		Prep./ Service									
me/	3	Storage/ Disp.									
Ξ	4	Frozen Food				1) Observed cheese and meat snacks, and other dair					
Protection Time/ Temp.	5	Pure Food				in refrigeration unit. Hold all cold food @ 41 degrees					
	6	Reused Food				held @ 45 degrees F or colder. Food was moved to a unit during inspection. 2ND NOTICE.	a working portion of refrigeration				
٩	7	Transportation									
e	8	Storage Fac.				9,14) Observed refrigeration unit not holding food at the proper temperature. Rep					
Storage	9	Refrig. Units		\times		replace refrigeration unit.					
l Sto	10	Thermometer									
Food	11	Hazardous Mat.				17) Observed no single-use paper towels in the dispe					
ш	12	Spoils				located in the restroom. Employee states that the fac	lility doesn't have a key to open the				
ip.	13	Wash/ Sanitize				dispenser. Replace key or dispenser immediately. Continue to work on the compliance issues noted in the previous inspection.					
Uten./Equip.	14	Equip. Condition		×							
en./	15	Utensil Condition									
Ę	16	Storage				1					
e	17	Handwashing		X							
oye	18	Employee Hygiene									
Employee	19	Employee Habits									
ш	20	Food Cert./ Card									
Water	21	Water				1					
	22	Cross Con.									
Waste	23	Liquid Waste									
Wa	24	Refuse									
Vermin W	25	Rodents/ Insects									
Ver	26	Animal/ Fowl									
	27	Ventilation									
s	28	Doors									
Facilities	29	Floors									
Fac	30	Walls - Ceilings									
1	31	Toilet Fac.									
	32	Janitorial Fac.									
	33	Lighting]					
ġ	34	Clothing - Linen									
Misc.	35	Signs									
		Misc.									
			OUT =	Out	of con	pliance COS = Corrected on-site					
Receiv	ed B	y (Print): Jasmor	nd Ca	astille	0	Received by (Signature):	Date: 11/01/2023				
REHS	(Prin	t): Rick Florence	do			REHS (Signature):	Phone: 530-841-2114				
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Facility Name:	Weed Chevron			
		epresent Health Code violations and	t must be corrected as follow	'S'
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	smond Castillo			11/01/2023
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Page 2				000 071-2114

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